PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Number 0975307 0975307													nber
CLAIMS AS FILED - PART I (Column 1) (Column 1)						umn 2)			L ENTITY		OR	OTHER THAN SMALL ENTITY	
Ţ	OTAL CLAIMS		55					RATI	Ε	FEE	1	RATE	FEE
FC	OR -		NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00
TC	OTAL CHARGEABLE CLAIMS		55 minus 20=		· 35			X\$ 9	=		OR	X\$18=	630·D
INE	DEPENDENT CLAIMS		5 minus 3 =		2			X40			OR	X80=	160.00
ML	ULTIPLE DEPENDENT CLAIM P		RESENT				+135=		_			+270=	10333
• 11	the difference in column 1 is		less than zero, enter		"0" in column 2		TOTAL			OR		1604 2	
	1 .						1012		uL		OR	OTHER	1500-11
16).8.O4	(Column 1)	MENDED - PART II (Column 2) (Column 3)				SMALL ENTITY			OR	SMALL		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 55	Minus	<u>E</u>	5			X\$ 9:	=		OR	X\$18=	-
AMENDMENT	independent	• 5	Minus					X40=			OR	X80=	-
Ľ	FIRST PRESE	JLTIPLE DEF	LTIPLE DEPENDENT		CLAIM		+135:	_	_	OR	+270=		
1,	-15-05						ı	· 101				YOYAL ADDIT, FEE	
14	(7)	(Column 1)		(Colui	ກn 2)	(Column 3)	,	ADDIT. F	ec (ADDIT. PEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	· 27	Minus	5	5	• _		X\$ 9=	٠		OR	X\$18=	1
AME	Independent	• 4	Minus	5	-	<u> - </u>		X40=			OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR						'	+135=	-		OR	+270=	
							7	TOT. ADDIT. FI			OR	YOTAL ADDIT. FEE	
<u> </u>	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	•	NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NON	Total	•	Minus	••		a		X\$ 9=	.		OR	X\$18=	
PAE	Independent	•	Minus	•••		a .	lt	X40=	1		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ij	+135=	1	i		+270=	
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTA		· ·	OR	TOTAL	
	'Il the "Highest Nu	mber Previously Pa mber Previously Pa aber Previously Pai	aid For IN THI	an 3, enter "3."	_	ODIT. FE	_	ropriate bo		ADDIT. FEE			
		·				·							1

FORM PTO-675 (Rev. 8/00)